

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jul 10, 2000 08:00 AM
Secretary of State

DOCUMENT # N98000007309

1. Entity Name

MARANATHA THEOLOGICAL SEMINARY, INC.

Principal Place of Business

Mailing Address

4000 N. STATE RD 7

7390 NW 36TH ST.

404/405

LAUDERDALE LAKES

FL

LAUDERHILL

FL

33319

US

33319

2. Principal Place of Business

3. Mailing Address

4000 N. STATE RD 7

Suite, Apt. #, etc.

Suite, Apt. #, etc.

404/405

City & State

City & State

LAUDERDALE LAKES

FL

Zip

Country

Zip

Country

33319

US

4. FEI Number

65-0884615

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

POWELL LENNOX

7390 NW 36TH ST.

LAUDERHILL

FL

33319

US

Name

LEE NILKA V

Street Address (P.O. Box Number is Not Acceptable)

4530 NW 11TH STREET

City

LAUDERHILL

FL

Zip Code

33313

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE NILKA V. LEE

07/10/2000

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

**FILE NOW:
FEE IS \$61.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME RUFF NORVEL
STREET ADDRESS 520 NW 199TH AVE.
CITY-ST-ZIP PEMBROKE PNS FL 33302

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME GRANT ROLAND
STREET ADDRESS 1101 NW 46TH AVE.
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME DAVIS WILSON M
STREET ADDRESS 1301 NW 46 AVENUE
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME NORRIS JOE L
STREET ADDRESS 2809 SW 5 COURT
CITY-ST-ZIP FORT LAUDERDALE FL 33312

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME BELL WILLIE
STREET ADDRESS 3430 NW 2 STREET
CITY-ST-ZIP FORT LAUDERDALE FL 33311

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☐ Delete
NAME POWELL LENNOX
STREET ADDRESS 7390 NW 36 STREET
CITY-ST-ZIP LAUDERHILL FL 33319

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.